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Michelle Vandernoort	(Depositor's name)
<i>Michelle Vandernoort</i>	(Signature)
July 10, 2007	(Date)

23557 7590 04/11/2007

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APPLICATION NO	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO	CONFIRMATION NO.
10/764,728	01/26/2004	Q. Ping Dou	USF-T195XC1	1642

TITLE OF INVENTION: POLYPHENOL PROTEASOME INHIBITORS, SYNTHESIS, AND METHODS OF USE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$0	\$1000	07/11/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
OWENS, AMELIA A	1625	560-061000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a **Customer Number** is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Saliwanchik, Lloyd
& Saliwanchik

2

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE (CITY and STATE OR COUNTRY)

University of South Florida

Tampa, FL

McGill University

CANADA

The Hong Kong Polytechnic University

HONG KONG

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

☒ Issue Fee☐ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies

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☐ A check is enclosed☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorizing to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-0065 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2)

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Authorized Signature

*Glenn P. Ladwig*Date July 10, 2007

Typed or printed name

Glenn P. Ladwig

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